

# Lincoln



# Nebraska's Capital City

May 17, 2001

Mayor Wesely and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Salvador Carcamo d.b.a. Restaurante Y Pupuseria El Salvador, 1501 Center Park Road #100 requesting a class I liquor license for this location. This location was previously known as La Paloma, which did hold a class I liquor license.

Background information on Salvador Carcamo is as follows:

Salvador Carcamo was born in El Salvador. He was a member of the El Salvador military in 1965 and did serve for one year. He moved to the United States of America in 1968 and became a citizen of the United States of America in 1986.

Salvador Carcamo employment history is as follows:

1998 – present	Owner, El Salvador Restaurant	Lincoln, NE.
1995 – 1998	Waiter, Cornhusker Hotel	Lincoln, NE.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



#### Police Department

575 South 10th Street / Lincoln, Nebraska 68508 / Phone: 402-441-7204 / Fax: 402-441-8492 / Website: [www.ci.lincoln.ne.us](http://www.ci.lincoln.ne.us)

A nationally accredited law enforcement agency



Liquor License Business Report / Completed by Inv Fosler Date: 5-17-01

DBA: RESTAURANTE Y PAPERERIA EL SALVADOR

ADDRESS 1501 CENTER PARK

PHONE 477-2883

TYPE OF INVESTIGATION:

PURCHASE

UPGRADE

EXPANSION

NEW

OWNER

MANAGER

OTHER \_\_\_\_\_

TYPE OF BUSINESS Rest

CLASS: A B C D I J K CATERING OTHER \_\_\_\_\_

OWNERSHIP

CORPORATION

PARTNERSHIP

INDIVIDUAL

PURCHASE PRICE <sup>50,000</sup> ~~32,500~~ PROPERTY EQUIPMENT VALUE \_\_\_\_\_

AMOUNT FINANCED 28,000 SOURCE Cornhusker Bank

COLLATERAL Equipment COSIGNER(S) NO

LEASE AGREEMENT 1yr with 2yr option \$ 1922.00

EST INCOME %FOOD 75 %LIQUOR 25

To 3000<sup>00</sup> per mo

COMMERCIAL

INDUSTRIAL

RESIDENTIAL

TRAFFIC Moderate PARKING St - Street

READY FOR OPERATION: YES NO, EST DATE June 15 - 6pm <sup>AFTER</sup> <sub>Inspection</sub>

FOOD SERVICE Full Service # OF EMPLOYEES F/T 5 P/T 3

DOES LICENSE COMPLY WITH LEGAL DISTANCES: YES

EST SEATING 100

EST # DAILY CUSTOMERS 150<sup>00</sup>

HOURS OF OPERATION 11am - 10pm M-SAT Sun 11 - 8pm

HUMAN RIGHTS COMMISSION CHECKED YES NO N/A

Liquor License Investigative Report / Individual

Business (DBA) RESTAURANTE Y PUPUSERIA

Manager Owner Other \_\_\_\_\_

Name: SALVADOR CARLAMO DOB — Sex M

SSN — Phone: Home —

Address — City LINCOLN Zip —

US Citizen ? ☒ YES NO

Has applicant ever been cited for liquor law violations ? ☒ No  
Yes, Explain \_\_\_\_\_

Does applicant have an interest in another liquor license ? ☒ No  
Yes, Explain \_\_\_\_\_

Is spouse qualified to hold license ? Yes No ☒ N/A

If applicant is not an owner how will they be paid ? Salary Hourly N/A

How many hours per week will applicant be at the establishment ? 84 +

Any other employment ? ☒ No Yes, Explain \_\_\_\_\_

Any previous experience with a liquor license ? ☒ Yes No

Any criminal convictions ? ☒ No Yes,  
Explain \_\_\_\_\_

Is applicant a property owner in Lincoln ? ☒ Yes No

Is applicant involved in any civil litigation ? ☒ No Yes,  
Explain \_\_\_\_\_

☒ Photo

☒ Records Check

☒ References Provided

Comments \_\_\_\_\_

Inv Fosler 843 Date 5/17/01

Set date 5/21  
PH: 6-11-01

# STATE OF NEBRASKA



Mike Johanns  
Governor

City Clerk  
County/City Bldg  
555 S 10th  
Lincoln NE 68508

May 4, 2001

NEBRASKA LIQUOR CONTROL COMMISSION  
Forrest D. Chapman  
Executive Director  
301 Centennial Mall South, 5th Floor  
P.O. Box 95046  
Lincoln, Nebraska 68509-5046  
Phone (402) 471-2571  
Fax (402) 471-2814  
TRS USER 800 833-7352 (TTY)

49248  
162

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

**TWO KEY TIME FRAMES TO KEEP IN MIND ARE:**

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

CITY OF LINCOLN  
NEBRASKA  
MAY 9 9 42 AM '01

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

*Jill L. Nelson*

Licensing Division

Enclosures

Rhonda R. Flower  
Commissioner

R.L. (Dick) Coyne  
Chairman

Bob Logsdon  
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001  
REV. 12/99

No special use permit needed as per phone call w/ Ray Hill  
**APPLICATION FOR LICENSE**  
Nebraska Liquor Control Commission  
PO Box 95046, 301 Centennial Mall South  
Lincoln, NE 68509-5046

Planning Dept  
http://www.nol.org/home/NLCC  
Phone: (402) 471-2571  
Fax: (402) 471-2814

RECEIVED

MAY 02 2001

NEBRASKA LIQUOR

**INSTRUCTIONS:** Include: 1. Applicable fees payable to Liquor Control Commission  
2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of Articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251  
5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in TriPLICATE

**CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH**

Class of License (Check applicable class)	Registration Fee	License Fees	Corporate Surety Bond
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input checked="" type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	\$ 1,000 min.

**TYPE OF APPLICATION**

**CORPORATE SURETY BOND INFORMATION**

Type of application being applied for  
(place appropriate number in box)

1

- 1= Individual License requires Form 1 to be attached.  
2= Partnership License requires Form 2 to be attached.  
3= Corporate License requires Form 3 and 4 and Manager Application be attached.

Bond Company - for Classes L V W X Y only

Start Date Month/Day/Year

Bond Number

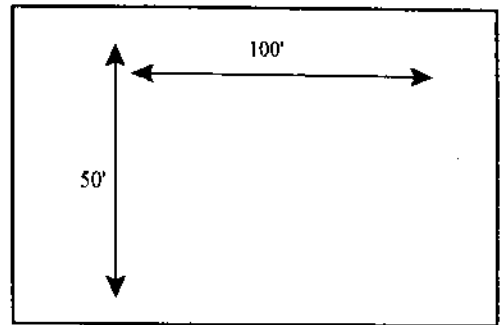
**SECTION A -- LOCATION INFORMATION -- Must be completed by all applicants**

Trade Name (name of business)			Telephone Number at premise to be licensed		
Restaurante Y Pupuseria El Salvador			(402) 477-2883		
1) Street Address of Proposed licensed premise			2) Mailing Address for receipt of Liquor Control Commission mailings		
1501 Center Park Road, #100			3096 "S" Street		
City	County	Zip Code	City	County	Zip Code
Lincoln	Lancaster	68512	Lincoln	Lancaster	68503

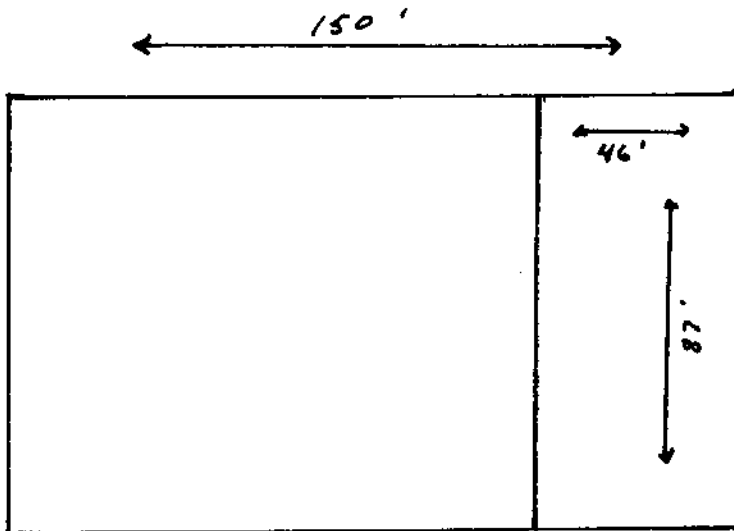
## DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.

N ↑



N ↑



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement approximately 30' x 50' at the East end.

*East portion - approximately 46' x 87' of main floor of 1 story building.*

### SECTION B

### OTHER INFORMATION REQUIRED

	Yes	No	Explanation/Comments
<p>1. <b>READ CAREFULLY.</b> Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>		X	

	Yes	No	Explanation/Comments
2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).		X	
3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.		X	
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	X		Cornhusker Bank Lincoln, NE \$28,500
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.		X	
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.		X	
7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?		X	
8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.		X	
9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.		X	
10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.			US Bank, Lincoln, NE Letitia Carcamo, Salvador Carcamo Yeldy Magaña
11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.			None
12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.			Salvador Carcamo 70 hours
13. List the training and experience of the person listed in #11 above in connection with selling and/or serving alcohol products.			15 years employed as bartender and waiter in Los Angeles 1980-1995
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)			ENCLOSURE Expiration date 6/30/2002
15. When do you intend to open for business?			June 1, 2001

15. List the principal residence for the past 10 years for all persons required to submit fingerprint cards. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Salvador and Letitia Carcamo			
3096 "S" Street, Lincoln, Nebraska	May 1996	2001	Lincoln, Nebraska
1607 Knox Street	May 1995	May 1996	Lincoln, Nebraska
854 S. Kenmoore Street	1990	1995	Los Angeles, CA

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign  
here Salvador A. Carcamo

sign  
here Letitia Carcamo

sign  
here \_\_\_\_\_

sign  
here \_\_\_\_\_

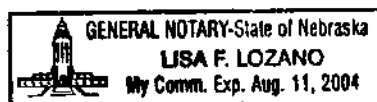
sign  
here \_\_\_\_\_

sign  
here \_\_\_\_\_

sign  
here \_\_\_\_\_

sign  
here \_\_\_\_\_

Subscribed in my presence and sworn to before me this 27<sup>th</sup> day of April, 2001



(SEAL)

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternative format.

Sign  
here [Signature]  
Notary Public Signature



# Individual Application for License FORM 1

**INSTRUCTIONS:**

- 1) An Individual Licensee Must be a Resident of the State of Nebraska.
- 2) Each Applicant and Spouse must attach fingerprint cards (2 cards per person) and proper fees.
- 3) All applications must be typewritten and submitted in triplicate.

**Name of Applicant (Last, First, Middle, Maiden). List any Previous Names or Aliases Used.**

Carcamo, Salvador Antonio

**Social Security Number****Date of Birth****Applicant's Home Address (1)**

3096 "S" Street

**Applicant's Home Address (2)****City**

Lincoln

**County**

Lancaster

**Zip Code**

68503

**Driver's License Number****State**

NE

**Home Telephone Number**

402

476

9009

**Business Telephone Number**

402

477

2883

**ARE YOU MARRIED? \_\_\_\_\_ IF YES, PLEASE COMPLETE.****Spouse's Name (Last, First, Middle, Maiden). List Any Previous Names or Aliases Used**Carcamo, Letitia;  
Paredes de Soltera; Letitia Magaña; Letitia Martinez**Spouse's Social Security Number****Spouse's Date of Birth****Spouses's Driver's License Number****State**

NE

